CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received	
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Please type or print in ink

Candidate

A Public Document

Please type or print in ink			
NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONÉ NUMBER
11	8:1	A	1 209 1 369-1071
Howard MAILING ADDRESS STREET	CINI IY	STATE ZIP C	(209) 369-2976 ODE OPTIONAL: FAX / E-MAIL ADDRESS
(May be business address)		41 A	en er
2137 TRENDA DE	. 6001	CA. 95.	272
1. Office, Agency or Court		4. Schedule Su	mmary
Name of Office, Agency or Court:		(Спеск аррисаріе	schedules or "No reportable interests.")
		■ During the reporting	g period, did you have any reportable
Division, Board, District, if applicable:		interests to disclos	e on:
Division, Dodice, Diction, 11 special		Schedule A-1	Yes – schedule attached
Your Position:			
Counc'l Membe	1	Schedule A-2 [nvestments (10% or gre] Yes — schedule attached ator Ownership)
If filing for multiple positions, list a position(s): (Attach a separate sh	additional agency(les)/ eet if necessary.)	Schedule B [Yes - schedule attached
Agency:			Yes — schedule attached Positions (Income Other than Loans, Gilts, and Travel)
Position:		Schedule D] Yes – schedule attached
2. Jurisdiction of Office (Che	ck at least one havi	Į	
	.n at least one box/	Schedule E '[Yes - schedule attached
State		Income – Gitts	į
County of	And the second s		Yes – schedule attached
City of LOOT		Income – Travel Pay	
Multi-County			-or-
Other	1	→ ☐ No reportable	interests on any schedule
		Total number of pag	D.S.
3. Type of Statement (Check	at least one havi		this cover page:
	1		
Assuming Office/Initial Date:			
Annual: The period covered is July through December 31, 2003.	anuary 1, 2003,	5. Verification	
-OI-		I have used all rea	sonable diligence in preparing this
O The period covered is/_ December 31, 2003,	, through	my knowledge the in	riewed this statement and to the best of a formation contained herein and in any is true and complete.
Leaving Office Date Left:/_ (Check one)		I certify under penal of California that th	y of perjury under the laws of the State e foregoing is true and correct.
O The period covered is January the date of leaving office.	1, 2003, through	Date Signed	vil / 2004 (month, day, year)
-OF-			
O The period covered is/_ the date of leaving office.	, through	Signature (File the	riginally signed statement with your filing official.)

FPPC Form 700 (2003/2004) FPPC Toll-Free Helpline: 866/ASK-FPPC

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 7	00
FAIR POLITICAL PRACTICES COMM	SSION
Name	
4000	

> NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Chevren	Varyward/ LOLD Abbett a Co.
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
4 4	
Stock	
FAIR MARKET VALUE	FAIR MARKET VALUE
32,000 - \$10,000 Z \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock	Stock
puring	Other <u>Band/Mufual Fund</u> (Describe)
(Describe)	(Describe)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ / 03 / / 03
J J 03 J 03 ACQUIRED DISPOSED	
	> NAME OF BUSINESS ENTITY
> NAME OF BUSINESS ENTITY Washington Muctual	Praxair
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DEGONA FIOR OF DOMESON AND A
Liquid Asset Serings	**************************************
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT
NATURE OF INVESTMENT Stock	Stock
•	
Other Savings (Describs)	Other (Describe)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ / 03 // 03
/ / 03 / / 03 ACQUIRED DISPOSED	ACQUIRED DISPOSED
ACQUIRED DISPOSED	
> NAME OF BUSINESS ENTITY	> NAME OF BUSINESS ENTITY
	Acceptance of the second secon
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT
NATURE OF INVESTMENT	Stock
∐ Stack	
Other (Describe)	Other(Describe)
<i>(2.1.1.1.1.)</i>	IF APPLICABLE, LIST DATE:
IF APPLICABLE, LIST DATE:	
	ACQUIRED DISPOSED
ACQUIRED DISPOSED	MOROHIMA PINI COMP
Comments:	

SCHEDULE C Income & Business Positions

(Income Other than Loans, Gifts, and Travel Payments)

CALIF	ORNIA	FORM	70	0
FAIR POLI	TICAL PRA	CTICES C	OMNISSIO	N
Name				
	····			

>	NAME OF SOURCE CITY of LODI	>	NAME OF SOURCE
	ADDRESS THE ST. PO. Box 800X		ADDRESS
	City Hall 221 W. Rine St. Po. Cox 8006 Business activity, if any, of source LODI. CA. 95241-		BUSINESS ACTIVITY, IF ANY, OF SOURCE
	YOUR BUSINESS POSITION COUNCIL Member		YOUR BUSINESS POSITION
	GROSS INCOME RECEIVED		GROSS INCOME RECEIVED
	S500 - \$1,000		\$500 - \$1,000 \$1,001 - \$10,000
	\$10,001 - \$100,000 OVER \$100,000		S10,001 - \$100,000 OVER \$100,000
	CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's income Loan repayment		CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's income Loan repayment
	Sale of		Sale of (Property, car, boat, etc.)
	(Properly, car, boal, etc.) Commission or Rental Income, list each source of \$10,000 or more		Commission or Rental Income, list each source of \$10,000 or more
	Other (Describe)		Other(Describe)
>	NAME OF SOURCE	>	NAME OF SOURCE
	ADDRESS		ADDRESS
	BUSINESS ACTIVITY, IF ANY, OF SOURCE		BUSINESS ACTIVITY, IF ANY, OF SOURCE
	YOUR BUSINESS POSITION	·	YOUR BUSINESS POSITION
	GROSS INCOME RECEIVED		GROSS INCOME RECEIVED
	\$500 - \$1,000 \$1,001 - \$10,000		\$500 - \$1,000 \$1,001 - \$10,000
	S10,001 - \$100,000 OVER \$100,000		\$10,001 - \$100,000 OVER \$100,000
	CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's income Loan repayment		CONSIDERATION FOR WHICH INCOME WAS RECEIVED Selary Spouse's income Loan repayment
	Safe of (Property, car, bost, etc.)		Sale of
	(Property, cer, bost, etc.) Commission or Rental Income, list each source of \$10,000 or more		Sale of (Property, car, boat, etc.) Commission or Rental Income, list each source of \$10,000 or more
	Commission of Trainer massing, no outsit as a contract of the		Number of the state of the stat
	Other		Other
	[Other (Describe)		(Describe)
Ce	omments:		
		v: 10000077 - Li-Lata 1400	